



Miami's bright lights — and other attractions — draw millions of visitors each year. But for Army surgeons, nurses and medics, the city's main attraction is the real-world training offered by one of the nation's busiest trauma centers.



Story and Photos by SSG Alberto Betancourt



(Above) MAJ Edgar Chauvin (at left), commander of the 936th FST, and Ryder Trauma Center staff members wait for an incoming patient near the facility's heliport. When the civilian medevac helicopter arrives (right) the patient is whisked away for treatment.

## Real-World Trauma Training

ITH its turquoise waters, balmy temperatures and sizzling nightlife, Miami attracts millions of visitors annually. However, not all are there to enjoy the city.

Army surgeons, nurses and medics who have been coming to the Florida city since January 2002 seldom find time to enjoy Miami's neon lights or its warm Atlantic Ocean swells. Instead, these members of forward surgical teams have helped save hundreds of lives while honing their skills at the Army Trauma Training Center at Jackson Memorial Hospital's Ryder Trauma Center.

"This program exists because we want to provide great

surgical care on the battlefield," said COL Tom Knuth, the director of the Army's training program. "We want our commanders to know that their soldiers will get the same level of quality care on the battlefield they can get at any urban trauma center."

As the only level-one trauma center in Miami-Dade County, the Ryder Trauma Center can treat any type of trauma victim. This allows soldiers to work shoulder-toshoulder with some of the world's most experienced medical personnel.

"Ryder's medical personnel treat traumas every day," said Knuth. "Some of them have more than 20 years of

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experience. Most of the Army surgeons deal with a healthy population and never see trauma. This training raises our medical team's level of confidence and improves its abilities to deal with combat wounds."

Nearing the end of their 10-day training cycle, MAJ Edgar Chauvin and members of his 936th FST were wearing scrubs and looking tired after running the trauma center the past 24 hours. They were more than ready for some well-earned rest. Yet any rest would be temporary, since the Paducah, Ky.-based Reservists had been activated for duty in Southwest Asia.

"I'm confident that now that we've completed this training, my team can be mobilized anywhere in the world and complete its mission," said Chauvin. "We came here and recognized our weaknesses, worked on those weaknesses and eventually ran the Ryder Trauma Center."

Unlike soldiers assigned to active-duty FSTs, Reserve team members don't all work in the medical field.

For example, SGT Charles Fowler, a licensed practical

- The 936th's CPT Dean Canestrini prepares for the arrival of an incoming patient. Soldiers training at Ryder work with some of the nation's most experienced trauma specialists.
- Members of the 936th work on a patient suffering from an open fracture. As the only level-one trauma center in Miami-Dade County, Ryder receives patients with injuries of all conceivable types.





nurse with the 936th FST, is an industrial piping valve salesman when not drilling with the unit.

"My civilian job has nothing to do with my military job," said Fowler. "Over time, I've lost confidence in my skills. But the training at this trauma center reintroduced me to the clinical environment and honed those skills."

Fowler said he and his team worked on a variety of trauma patients, including victims of burns, stabbings, gunshots and motor-vehicle accidents.

"The training was very tough," he said. "It was the first time I've dealt with these kinds of patients. But it is by far the best medical training I've ever received."

Keeping the soldiers engaged and helping them work better as a team is the core of the training program.

"For the FSTs, it's a great benefit to have a concentrated educational experience with a high number of trauma patients," said Dr. Stephen Cohn, medical director for the Ryder Trauma Center. "We've created a program to help the teams work better together and help each individual team

member improve his or her skill."

Cohn, a former Army Reserve medical officer, said the training initially lasted four weeks and graduated 16 active-duty FSTs. He said the Army's higher operational tempo around the world led to the shorter, 10-day training period.

"This is like a trauma obstacle course, where we can see where the teams' communications break down and what skills need to be worked on," said Cohn. "We improve their skills, and when they go back to their home units they continue honing those skills."

A permanent Army cadre consisting of Knuth and seven other soldiers is responsible for training the many teams rotating through the trauma center.

"Although we're trainers and mentors, the trauma center also serves as an incredible educational platform that also helps develop our medical skills," said SSG Rigoberto Alcala, a licensed practical nurse and the only enlisted member of the Miami cadre.

"Training here is a tremendous experience for both the



PFCs Tyana Nedd and Ricardo Jean-Baptiste, both medics with the 1st FST from Fort Totten, N.Y., emplace an ambulatory bag to help a stabbing victim breathe.

After running the Ryder Trauma Center for more than 24 hours, members of the 936th FST take a moment for an impromptu after-action review.



FSTs and the permanent cadre," he said. "I don't think a soldier in the medical field can receive training like this anywhere in the world."

As the 936th FST prepared to return to home station, from where it was to deploy to Southwest Asia, the 1st FST from Fort Totten, N.Y., was beginning its 10-day cycle.

Several days into the training, CPT Leonard Pollock, a triage nurse, said he had never gone through training as intense as the kind he was encountering at Miami's Army Trauma Training Center.

"The hands-on ability to work on human beings is immeasurable," said Pollock. "We're learning everything we need to learn to help our fellow soldiers survive if wounded in combat."

At the end of its 10-day training cycle, the 1st FST was also activated and deployed to Southwest Asia.

As Ryder's Sylvia Hernandez performs a cardiogram, 1st FST PFCs Tyana Nedd and Ricardo Jean-Baptiste monitor the condition of the elderly patient.



